

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
10/599432

FILING DATE

APPLICANT(S)

9/28/06

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1					51					
2			1					52					
3			1					53					
4			1					54					
5								55					
6								56					
7								57					
8								58					
9								59					
10								60					
11								61					
12								62					
13								63					
14								64					
15								65					
16								66					
17								67					
18								68					
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36								86					
37								87					
38								88					
39								89					
40								90					
41								91					
42								92					
43								93					
44								94					
45								95					
46								96					
47								97					
48								98					
49								99					
50								100					
TOTAL IND.			2		2			TOTAL IND.			2		2
TOTAL DEP.		2	2	2	2			TOTAL DEP.			2		2
TOTAL CLAIMS			4		4			TOTAL CLAIMS			4		4